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ABSTRACT

The swimming instruction guide presents teaching techniques and skill progressions for developmentally disabled individuals and includes program development and administrative guidelines. Part 1 discusses swimming and developmentally disabled children, program planning and preparation elements (including pool, scheduling, staff, parents, transportation, orientation, flotation devices), and answers frequently asked questions. Part 2 describes 18 swimming activities, including adjustment to water, breath control, basic kicking and armstroke skills, jumping, floating, turning over, changing direction, and personal safety. The eight appendixes include a swimming release form, information sheet, progress chart, teaching suggestions for volunteers, bath-time activities for children, and a bibliography and index. (BD)

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A GUIDE TO

SWIMMING INSTRUCTION

FOR DEVELOPMENTALLY DISABLED CHILDREN

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This GUIDE was coordinated and designed by the staff of Deborah Pierce Designs, Cambridge, Massachusetts.

Susan Noble

The Commonwealth of Massachusetts
Department of Mental Health

190 Portland Street, Boston, Mass. 02114

Dear Colleagues:

For almost twenty years, Massachusetts has had a law providing Community Clinical Nursery Schools for young retarded children. The program is conducted by the Department of Mental Health. Over the years, thousands of children have been helped in their development and prepared for special educational services in the schools. Some of these children have had severe emotional problems, some physical limitations and, increasingly, we are serving those with multiple impairments.

Our Nursery Schools have been conducted in schools, churches, hospitals, other public buildings, and occasionally in a university. They have been urban, suburban, and semi-rural areas. In the beginning particularly, our teachers came from a variety of backgrounds. Pre-school education had not reached the level stimulated by Head Start, and there were few training programs for early childhood educators -- almost none for teachers of retarded children. In general, we chose trained and experienced early childhood educators -- even with no special education training or experience -- because we felt, and continue to feel, that understanding of and experience with young children is the major variable.

We developed our own training and supervisory system under the superb leadership of Mrs. Dorothy G. Tucker. Over the years, she attracted many gifted persons both to our regular staff and as special consultants.

We have never been too proud to learn from whoever would teach us -- although our children have been our chief source of knowledge.

Many new insights were developed by our staff, written down, shared with and tried by others, refined and modified. We have had such good response from outside colleagues with whom we have shared the material that we decided to print much of it for wider sharing. In the current series are the following manuals:

A GUIDE TO CREATIVE ARTS FOR DEVELOPMENTALLY DISABLED CHILDREN

A GUIDE TO SWIMMING INSTRUCTION FOR DEVELOPMENTALLY DISABLED CHILDREN

A GUIDE TO CREATIVE MOVEMENT FOR DEVELOPMENTALLY DISABLED CHILDREN

A GUIDE TO IMAGE EDUCATION: SOME EXPERIENCES IN CLASSROOMS FOR DEVELOPMENTALLY DISABLED CHILDREN

A GUIDE TO TEACHING DEVELOPMENTALLY DISABLED CHILDREN

We hope you will find these GUIDES useful and practical. We hope they will widen the horizons of possibility for young children with developmental disabilities. The surface has only been scratched -- we all have so much more to learn. If, in reading these GUIDES, you discover that you have better solutions to some problems than we have, please send them along -- our kids don't care where good ideas originate.

Cordially,

Lewis B. Klebanoff

Lewis B. Klebanoff, Ph.D., S.M. Hyg.
Assistant Commissioner for Retardation

prologue

Swimming has long been an enjoyable and healthful activity. Increasing numbers of teachers and parents of developmentally disabled people are becoming aware of the recreational, as well as the therapeutic, benefits of swimming. Yet there is very little material available which deals with the teaching techniques and skill progressions for the developmentally disabled individual. This GUIDE is an attempt to meet the need for such specialized material.

A GUIDE TO SWIMMING INSTRUCTION FOR DEVELOPMENTALLY DISABLED CHILDREN includes recommendations on how to set up and run a good swimming program. The GUIDE also contains suggestions for teaching skills to swimmers who have had little or no previous experience with the water or with swimming.

The activities should be taught in the order in which they appear in the GUIDE, but there will be some variations based upon individual differences: some children may have to concentrate on one skill at a time, while others may be able to work on two or three in each class. For example, the skill of Breath Control could be taught at the same time as the locomotor skills of Kicking and Armstrokes. In any case, the pace of learning should be in accordance with the specific needs of the individual.

Throughout the GUIDE, the author has referred to the learners as "children." It is important, however, to consider that much of the information and methods described applies also to adults with mental retardation and/or multiple handicaps. And, although teaching techniques and instructions may be different for some adults, the skill progressions are the same for all groups.

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SWIMMING AND DEVELOPMENTALLY DISABLED CHILDREN

Joanie practices walking in the water, something she cannot do on land. Carlos uses his hands to paddle while he floats in his lifejacket; he has never been able to move himself anywhere before. Johnny holds onto the side and kicks his feet without help; he cannot walk without someone holding his hands out of the water.

Swimming can reduce the effects of physical handicaps; it can increase independence; it can increase body awareness; and it can increase neuromuscular efficiency.

Rich is practicing throwing a life-ring to Steven. Matthew sits on his towel while waiting to go in. Kathleen calls to Patty to catch her when she jumps from the side. Mark waits for Lisa before going down the ladder into the water.

Swimming can make people more aware of hazards and safety skills.

Mary counts "One, two, three, JUMP!" when she jumps into the water. David talks about kicking his feet and blowing bubbles on his way to class.

Swimming is a good atmosphere for language stimulation.

Robbie is swimming all the way across the pool while wearing his bubble. Lisa counts "One, two, three" and ducks under the water. David is playing catch with Sean using a Nerf Ball. Steven watches very carefully as Celena shows him how to do the armstroke. Rich wants to jump in again.

Swimming increases self-confidence; it is relaxing; it is social; and it is good exercise.

Most of all, swimming is fun!

FIRST THINGS FIRST

Any good swimming program requires careful planning so that the program provides a safe and effective experience for everyone involved.

The Pool and Scheduling

Before there can be any swimming program at all, there must be a place to swim. The YMCA, public school, college, city recreational facility (provided there is adequate insurance coverage) are all good sources of pools. Some of these facilities may require a fee for the use of the pool (usually $15-30 per session, or $1 per person each session).

The ideal pool will be clean and safe, have an adjacent dressing room with lockers, showers, benches, hair dryers, and an out-of-the-way entry into the water. The deck should be covered with a non-skid surface (appliques of a non-skid material may be used). The pool should be shallow enough at one end so children can stand; if it is not, arrangements for modifications, such as submersible blocks or platforms, will have to be made (see Appendix F). The water temperature should be 84-86 degrees, and the air 84-88 degrees. Regardless of the type of pool facility available, at the very least it should be clean, safe, and warm enough to prevent chilling.

The Staff

All the swimming classes must be conducted under the supervision of a Red Cross Water Safety Instructor, preferably one who has had experience in teaching the retarded or the very young to swim. The ratio of staff to learners should be one-to-one; it is permissible, however, to have a one-to-two ratio with more able groups who can stand in the pool. There should also be an adult on the deck to supervise any people who are not in the water. The teachers and volunteers need not necessarily be strong swimmers, but they should be comfortable in the water and have some knowledge of beginning swimming skills. Volunteers can be soli-

cited through local Associations for Retarded Citizens, colleges (make your requests at the beginning of the semester), high school students (contact the guidance office), and community volunteer agencies.

Prior to the first class at the pool, the staff should meet to go over pool procedure, assignments of students, and teaching progressions. Each teacher/volunteer should work with the same child each time. Each should be given written instructions on teaching procedures and swimming progressions (see Appendices C and D). There should be regular meetings of the staff for evaluations of each learner and the program throughout the year. All staff members must be familiar with basic First Aid and emergency procedures.

The Parents

The parents should meet with the swimming supervisor and the classroom teachers before the program starts. The value of a swimming program and what to expect from it should be discussed. Permission and Information forms can be given out and explained; make an early deadline for their return (see Appendices A and B). Parents may need to refer certain questions on the Information form to their doctors; but, unless required by the pool administrators, a medical form signed by a doctor may not be necessary, since all children must have a doctor's medical form upon entrance into school. (A medical form may be required by the pool administrators.)

Some parents will have fears about colds and the dangers of swimming. Such concerns will have to be dealt with in a positive manner: by emphasizing the benefits of swimming and the safety precautions which will be taken. Written instructions should be given out at the first meeting (see Appendix E, "Bath-Time Activities for Children"). A Bibliography (Appendix G) may also be given out at this time.

Once the children have become accustomed to the routine of swimming, their parents may be invited to visit. There should not be more than two or three parents present at any one time. If possible, the parents should observe the class from a place where they cannot be seen. At the end of class they can be invited into the pool so that their children can demonstrate their accomplishments.

Reports on the child's progress in swimming should be sent to the parents. Regularly throughout the year and at the end of the program, they should receive a detailed summary of their child's accomplishments in swimming: a copy of the Swimming Progress Chart or a synopsis of the Chart, for example (see Appendix C). A certificate may be made for this as well.

"WE'RE GOING SWIMMING!"

The key to a successful and safe program of swimming instruction lies in the preparation of teachers, parents, children, facilities, and procedures.

Preparation

There should be some preparation in class before the first visit to the pool to help the children adjust to what could be an overwhelming situation. Preparation might consist of water play, pictures and games about swimming, and dramatic play about how to swim. The teacher might show the children the bag with the extra towel, brush, comb, powder, underwear, and plastic bag; and might also ask the children to help in selecting toys, such as Nerf Balls, plastic balls, and boats, to take to the pool.

Transportation

The teacher should inform the cab or bus company, or volunteer drivers, about the directions to the pool, the entrance to be

used, and the schedule for delivery and pickup at the pool. Parents should be informed as to when and where their children can be met to return home.

Orientation

The children can have their bags and a towel with them, even though they won't be swimming on the initial visit. The purpose of the initial visit to the pool is to familiarize the children with the setting and the procedures to be followed. First they should be shown the dressing room: where their clothes will go, the hair dryers, and showers (turn them on and let the children feel them). The children may take their shoes off and put them with their coats in a locker; the lockers can be labelled with their names. They may then go into the pool room, taking their towels to sit on. The swimming supervisor then explains the safety rules: no running, wait on your towel until the teacher takes you into the water, etc.

The children should also meet the teachers, who are not part of the regular staff, but to whom they have been assigned. These teachers can take the children over to the pool to see it and feel the water. When the children are ready, they may return to the dressing room and put their shoes on. They can then have their snack and talk about the pool with their teachers.

Class Procedure

At the first actual swimming class, extra time should be allowed for dressing. (Note: the children should always be toileted before going to the pool.) All the children should follow the procedure of sitting on their towels upon arriving at the pool room. There can be one teacher supervising the children as they come into the pool, since the other teachers might still be busy dressing slower children.

The supervisor can demonstrate the steps involved in going into the water, and might take a bold or experienced child in for demonstration purposes before the others are taken in by their own teachers. After the first class, the teachers may take in their own children, one at a time, when they are ready.

Each time the teacher presents a new skill, she should demonstrate it either personally or use someone else who feels comfortable as an example. The children can be sitting on the deck so that they may see clearly.

There should be time at the start of each class for review of skills previously learned. This is a warmup and practice, and starts the children doing something familiar.

Some time in each class should also be spent on teaching the children safe behavior around the pool. Later, those who are able can be taught simple lifesaving skills.

The swimming class should be fun; the children must want to participate in order to learn. During the early stages of the program, there will be children for whom the experience is not fun. Play with favorite toys, play with other children, and play with teachers should make up the major part of these early classes. Splashing should be kept to a minimum near others, but it can be great fun to see how big a splash you can make while kicking. The class should always end on a positive note. This can be done by having the child do his or her favorite activity to the accompaniment of cheers and applause.

Children should be taken out of the water before they become overtired or chilled; they cannot learn much when they are cold and uncomfortable. They will also be more apt to develop negative feelings about the swimming experience if they become unhappy too often.

If a child becomes fearful, either over a new skill or from a frightening experience, it is advisable not to make a fuss. The teacher should go back to skills that the child can perform successfully. The more of an issue made over these incidents, the more the child will react in subsequent cases.

The swimming supervisor should have the final say on all decisions relating to the use of the pool and to the conduct of the class.

Flotation Devices

Flotation devices are useful teaching aids if they are properly used. There are a number of such devices, and each has its own purpose and advantage.

- Lifejackets should not be used on most children, since they are too restricting. Physically, lifejackets inhibit the use of the arms, and are dangerous if the wearer does not know how to maneuver in them. However, lifejackets can be a very valuable aid for severely physically handicapped children, as they provide body support as well as freedom from total dependence on an adult. The lifejackets also allow severely handicapped children to use all of their limited abilities to move about in the water. The Mae West type of Coast Guard approved lifejacket is essential for children with poor head control, because the collar will support the head.

- Simple styrofoam flotation aids come in a number of shapes and sizes, and can be very useful in providing children with the support they need to develop one or more parts of the body in swimming. Some such devices are styrofoam or inflatable bubbles which strap around the waist, "Swim-Kwik" belts which also go around the middle, and kick boards (also called flutter boards). A variation on the styrofoam bubble can easily be improvised using a cube cut from packing material and slit with a large knife, with a webbed strap for a belt. Two "D" rings can be sewn on

for a buckle. These devices are worn around the child's middle with the bubble in the back. This is designed to keep him afloat while allowing him complete freedom to use the arms and legs.

At first the child will be in a vertical position, and will have a bicycle type of kick. As the armstroke and kicks get stronger and more efficient, the child will move into a more horizontal position and his kicking will improve itself. The use of the bubble makes it possible for the child to develop strong arm and leg strokes before floating is mastered. In addition, the transition from swimming with the bubble to swimming independently can occur gradually, when the child has the skills and confidence to try short distances unsupported.

- Flippers can be useful with children who have weak legs, helping them develop a stronger kick. They can also be fun for short periods on children who have fairly good kicks. They should not be worn for long periods, as the children can get cramps in the feet and legs, and can develop an over-dependence on them.

- Arm bands are inflatable belts that fit around the upper arm. They are most useful on a paralyzed arm, but are restricting in other instances.

There are many other inflatable devices, such as the rings or rafts that support part or the whole of a child's body. These are not to be used with beginning swimmers except in very shallow water under controlled conditions. Such devices are apt to be very unstable and tip over easily. These are most useful during free-play periods, but styrofoam devices do just as well and are generally preferable.

- Swim masks and snorkles are not a good idea in teaching swimming. For one thing, they may leak; and for another, they do not encourage the child to develop proper breath control skills.

Flotation devices should be introduced after the children have acquired some of the basic skills such as kicking, arm strokes, and a degree of breath control. These aids can be used to give the children a feeling of independence; they also provide the opportunity for practicing swimming skills in a functional manner before the children are able to float on their own. This practice is particularly necessary in pools where the children cannot stand, because it allows them to be supported while practicing the skills.

The children should wear the flotation devices for most of the time while they are in the pool, but they should have some time during each class when they practice moving without them, in order to avoid becoming dependent upon the aids.

MOST FREQUENTLY-ASKED QUESTIONS

A number of questions always arise in early sessions with parents. The following are some of the most frequently asked.

* "What can you do when children are afraid of the water?"

First of all, the fear must be acknowledged. Then it is up to the teacher to determine what type of fear it is: is it apprehension about trying new things in a rather awesome setting, or is it an overwhelming feeling bordering on hysteria? In the first instance, the most effective way of helping children deal with their fear is gentle, firm persuasion and distraction. The entry into the water for the first time should be slow and gentle so that the child is not shocked into greater fear. The use of a favorite toy in the pool can help distract the child from the fear. The child should not be splashed; sponges or Nerf Balls, which allow the child to control the amount of water on the body, are useful. The teacher

should not give in to the child who indicates refusal to try a new skill unless it is apparent he will panic; rather, the child should be gently but firmly persuaded to try and then profusely praised for performing the skill.

In the case of an overwhelming fear which could easily become hysteria, additional methods may have to be used. It may not be possible to get a child such as this into the water for several sessions; he or she should not be forced. It may even be necessary to bring in a dishpan or small wading pool and fill it from the large pool so that the child may play in it before going into the larger pool. It may be possible to pair the child with one who is not afraid, for small games and play in the water. Above all, the pace should be slow, with very short periods in the water at first. Each of these sessions should also end on a positive note by doing a favorite activity or performing a skill with success. It may take a long time, but the ultimate aim for the fearful child will be to make the time in the pool pleasant and fun.

* "What can you do if the children cannot stand in the water?"

There are several solutions. One, the ratio between instructors and children should be one to one, with the instructor providing support and being responsible for the child for the whole time in the pool area. In addition, there should be an adult on deck to supervise children out of the water, and a qualified lifeguard present.

It is possible to raise the bottom of the pool by constructing a submersible platform out of plastic milk cases (see Appendix F). This platform can raise the bottom at least 12" in a part of the pool. Where the children can stand, they may be more willing to experiment with floating and similar skills

because they know they can put their feet down anytime. Knowing where the bottom is also helps reduce the fear of falling which is common when the children do not know how far it is to the bottom.

* "Do children get more colds if they swim in the winter?"

Not if proper precautions are taken. Certainly, many children will get more colds in the winter, regardless of whether or not they are swimming. Temperature changes, closed rooms, and lowered resistance are all factors increasing frequency of colds, but swimming need not be another factor. Children in swimming should not be allowed to get over-tired, chilled, or leave the building damp. Warm clothing with extra underwear and sweater, a hat and scarf, boots, and mittens are necessary. The small hand-held hair dryers are very valuable and not as scary as the large blowers, which are usually set too high on the locker-room wall. The instructors should make very sure that they take the children out of the water before they get chilled or too tired.

* "What can we do at home?"

In the bathtub or the wading pool: The most obvious place to practice some of the swimming skills at home is in the bathtub. This should be a very pleasant time for the child, since it is enhanced by having the parent's undivided attention for a while. A small backyard pool can serve the same purpose in the summer. For a more complete description of activities, see Appendix E, "Bath-time Activities."

* At the beach: Many ocean beaches will not allow the use of flotation devices. Actually, they are not necessary at a beach because the bottom slopes off gradually. The

child can practice kicking and blowing bubbles lying in shallow water with his/her hands on the bottom. The child should be watched carefully, especially if there are any waves. Many will do quite a lot of experimenting with skills because of the confidence of being able to touch bottom. This should be encouraged.

* "What do we do if the child chokes?"

First, do not make a big fuss over it. The bigger the fuss that is made over a mouthful, the bigger the fuss the child will make the next time, which can lead to fear. Rather, make light of it, telling the child he should not drink the pool, but leave some water for the rest of the class. Have the child raise the arms overhead and take a deep breath to control the coughing. This position should be held until the coughing subsides. The worst that can happen, under most circumstances, is that the child will gag. Getting an accidental mouthful is not a bad thing. The child learns the consequences of keeping his mouth open, and learns to control the situation.

* "Will my child ever learn to swim?"

Some will:
There should be no undue pressure on the children to learn to swim. Most will learn in time. There are many benefits from a swimming program, and the skill of swimming is only one of them. The gains in confidence, body image, motor and cognitive skills, language, and many other areas are also well worth the effort. Even if the children do not learn to swim very quickly, they make many gains. It is more important that the swimming program be a pleasant experience that the children enjoy, and in which they want to participate.

Some won't, but. . .
There are some children who will not learn to swim in the traditional sense. Many physically handicapped children will need some swimming aids such as flotation devices, flippers, or life jackets. However, as in the previous instance, the benefits are well worth the effort. This is especially true in the area of recreation. Swimming may become one of the few recreational activities in which they can participate with non-handicapped peers.

2 SWIMMING ACTIVITIES

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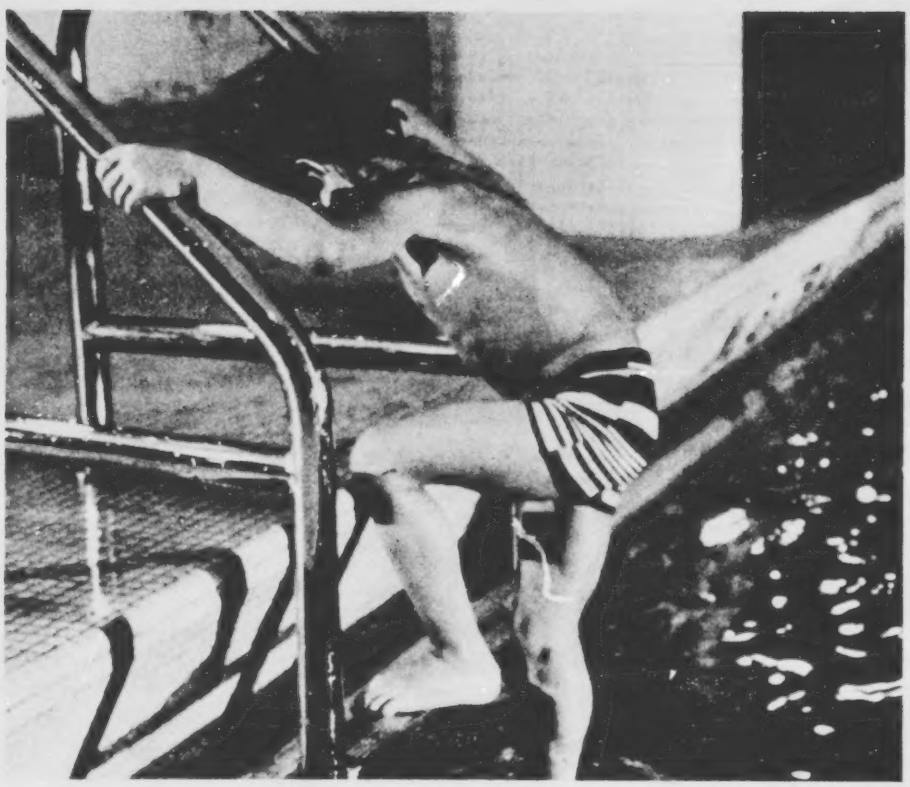

section 1
adjustment to the water

description

The children gain familiarity with the pool setting, and with the feeling of being in the water.

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1. entering the water

how to do it

The children sit on the edge of the pool with their feet dangling in the water. The teacher should then enter the water and help the children in, either by lifting them or by assisting them down the ladder. In most cases, the children should be held and ducked to the shoulders if they cannot stand. Those who are able to stand can hold the teacher's hands and duck together. Some may wish to hold onto the side of the pool and duck.

notes

If some children are very frightened, they can start by sitting on the edge of the pool splashing their feet. The teacher may wipe wet hands over the children, dribble water on them with a sponge, and gently begin to splash them. The teacher should be encouraging, but firm. Most children are afraid of the unknown, but unless they are likely to panic or become permanently scared of the water, they should go into the water, whether they want to or not. They can be allowed to cling at first, and then slowly ducked to the shoulders. The teacher may try to interest the children in other things -- such as toys, the filter, or the other children, particularly those who are having fun.

2. exploring the pool

how to do it

Move all around the pool. Those who cannot walk or stand may be towed or carried. Find the filters, the ladders, the underwater lights, the shallow and deep places, places to hold on, and the places where it is possible to stand.

notes

If there is no place to stand, every effort should be made to provide one. A platform made of milk cases can be made (see Appendix F). The platform area should be about 2-1/2 feet below the water's surface.

3. movement exploration

how to do it

Try moving arms and legs in different ways. The children can be towed while lying on their fronts or backs and kicking their legs. The teacher may hold their hands or support them under the arms. The child may also hold on to the teacher's shoulders while the teacher provides support under the child's hips. The children should be encouraged to make different kinds of splashes with their arms and legs, and can also experiment with pulling and pushing the water with their hands.

Nerf Balls can be submerged for the children to reach for. These rise very slowly and provide an opportunity for letting the children explore under water.

notes

The children can move about holding onto the side of the pool. They can try kicking, bobbing up and down, or moving from one place to another.

Those who can stand in the water can try moving about: walking, running, jumping, etc. They can start by holding the edge of the pool or onto the teacher's head. Later, they should use their arms to help them move about.

section 2
breath control

description

The children learn that they can put their faces in the water without fear of being unable to breathe.

It will be useful to teach the following skills simultaneously; alternate them to prevent boredom.

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1. blowing bubbles

how to do it

The teacher should start by blowing bubbles into the child's hand to get across the idea of blowing, and then demonstrate blowing while lowering his/her own face into the water so that bubbles are produced. The child can then try. Some children will have trouble blowing and will have a tendency to suck in when their mouths go in the water. Try for one or two bubbles at first. In order to get the idea, some lightweight object which will float, such as a ping-pong ball, may be blown along the surface. Blowing through drinking straws is especially useful for Down's Syndrome children who have trouble pursing their lips. If the child has spent some time at this without much success, it may be better to concentrate on keeping the mouth closed and holding the breath. Let bubbles come later.

2. face in the water

how to do it

The teacher wipes his/her face with wet hands, and then children do the same. The teacher next cups hands and splashes water over his/her face, as in washing; the children follow.

To encourage children to close their mouths when putting their faces in the water, they can be told to hum. The teacher may demonstrate how to put the face in the water while humming. The children can then try it. If they have difficulty, the teacher may get them to hum along and then quickly duck into the water with them.

Nerf Balls can be used in much the same way as sponges, and thus are very helpful in getting the child accustomed to water on the face. For example, squeeze water over the child's head, and then reverse. Or, fill the Nerf Balls with water, and they will rise slowly to the surface when submerged. The child can reach for the ball while it is rising, gradualy going deeper for it until the face goes into the water. Often the child will be concentrating so hard on the ball that he/she won't even be aware of the water.

notes

If the child starts to cough and choke from water in the nose, his/her arms may be raised above the head, and he/she should be told to breathe deeply and slowly. Continue until coughing subsides. Make light of the situation: unless the child has a prolonged spell of coughing, the activity should be tried again.

It may take a long time for some children to feel comfortable about putting their faces in the water. While working on this, other skills may be introduced, such as kicking and use of the arms. Some time should be spent in each class on submersion skills, since they will form the basis for many of the later swimming skills.

3. breath holding

how to do it

This is a continuation of the previous step. It will take some time to get the children to the point where they can submerge and hold their breath for any length of time. They need to learn to do this before they can learn to float or swim on their fronts. At first, the children may be allowed to hold their noses when they go under. They may also close their eyes if the chemicals in the pool are bothersome.

Games can make the learning of this skill fun and thus allow the children to progress at a faster rate. One game is to see how high the child can count while under water. Another game involves allowing the children to reach for submerged objects such as hockey pucks. If there is no platform, the teacher can hold the object under the water.

31

section 3
basic kicking skills

description

Children develop the ability to do a continuous kick on both front and back. Kicking is learned as a means of propulsion.

activities in this section

		page
1	Kicking in a Prone Position	33
2	Kicking on the Back	34
3	Prone Kicking with Flutter Board	35

1. kicking in a prone position

how to do it

The child is supported in a front-lying position by being held under the shoulders facing the teacher. The teacher then tows the child through the water while saying "kick, kick, kick..." The action of the water moving over the body will often stimulate the child to kick. If the child does not kick, however, the teacher may have him/her place hands on the teacher's shoulders while supporting the child under the thighs and manipulating the kicking action.

A natural kick should not be corrected. The kick should start from the hip, but the knees will bend some. The water should "boil"; a big splash is wasteful. If the knee bend seems excessive or the child is kicking only from the knee, the teacher can demonstrate the correct way by manipulating the child's legs.

In order to practice kicking, the child can hold on to the side of the pool. This will make it possible for the teacher to observe what he/she is doing and offer help.

Kicking contests are useful, especially for those who have a small kick or who kick only from the knee. Trying to make a large splash may make a child use the whole leg in a larger kick.

2. kicking on the back

how to do it

The teacher can demonstrate the correct kick while holding onto the side of the pool. The child is held with one hand under the hips, head resting on the teacher's shoulder. The other hand is put across the child's chest or also under the hips, depending on how much support is needed. The child is then towed while being told to "kick". As in the prone kick, the knees should not bend too much, although this is less likely to occur than on the front. The feet should just come out of the water as the child kicks. The child should not be allowed to "sit" in the water; if this happens, push the hips up.

The child can practice kicking while holding onto the side of the pool. However, the teacher may hold the child to encourage good body position, and may also want to help by pushing the hips up.

notes

Many children find it frightening to be on their backs. This is partly because they cannot see the teacher. The teacher can talk to the child while assisting in this position. Sometimes, a second person assisting the teacher, standing in a visible location, is useful.

3. prone kicking with flutter board

how to do it

Once the beat of the kick has become fairly regular and even, the child may practice with a flutter or kick board so that he/she will be able to propel himself/herself independently through the water. The teacher may have to steady the board in the beginning. The distances which the child will be able to travel should be gradually increased. The child should be encouraged to put the face in the water while kicking and to lift the head at regular intervals to breathe.

notes

Even though the child may be working independently, the adult responsible for him/her should never be far away. It is very easy to tip over a flutter board, which may give the child a bad scare and cause him to suffer a setback.

section 4
basic armstroke skills

description

Children develop the ability to use the arms as a means of propulsion on the front.

activities in this section

		page
1	Practicing Armstroke on Land	39
2	Practicing in Shallow Water	39
3	Practicing with Flotation Device	40

1. practicing armstroke on land

how to do it

The teacher can demonstrate the stroke, first while in the water and then standing on the deck. The stroke is similar to the "dog paddle", except that the arms extend straight out forward before pulling to the bottom. The hands do not come out of the water. If the child is unable to imitate this action, the teacher may manipulate the child's arms in the proper motion.

2. practicing in shallow water

how to do it

Once the child gets a feel of what this motion is like on land, it can be practiced standing in chest-deep water. After trying the stroke while standing, the child can do it while walking. The teacher can again demonstrate the stroke.

3. practicing with flotation device

how to do it

The child should be reminded to reach the hands far out in front under water and to pull toward the bottom. As one hand pulls, the other recovers. The movements should be slow and even.

Reaching hands out of the water while stroking wastes a lot of energy and efficiency. The teacher can put an arm in front of the child on the surface of the water, so that the child's hands will touch it before they can come out of the water.

Many children will not extend their arms fully in front of them while stroking, thereby reducing the strength and effectiveness of the pull. The teacher can review the correct motion with them, stressing the extension. An effective way to stimulate the reach is to have a child reach for a toy or ball and pull it to the tummy.

If the child is not in an almost horizontal position, performing the correct stroke may be difficult. The teacher can assist until the stroke has become fairly well established. It may not always be possible for the child to be in a horizontal position, but once the stroke is learned correctly, the correct position will return when the child acquires the ability to remain horizontal.

notes

These skills need not be perfected before going on to the next. In fact, the arm stroke will improve once the kick is added.

section 5
combining arms & legs

description

Children learn to combine the basic skills that will lead to a swimming stroke. They begin to develop a sense of independence and freedom in the water.

activities in this section

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1	Preparing for Free Swimming with Flotation Device	43
2	Free Swimming with Flotation Device	44

1. preparing for free swimming with flotation device

how to do it

The teacher can start by towing the child while holding both hands, giving the instruction to kick. The teacher's momentum and the suction caused by movement through the water will help the child move along in a nearly horizontal position.

Once the child can kick fairly well while being towed, the teacher should let go of one hand and tell the child to swim with it. Since the child may become tense at this point and forget to kick, the teacher should say again what to do.

notes

At this time it should be possible to determine whether the next step can be attempted immediately or whether the child will need quite a few practice times with this skill before going on. If the child panics and tries to climb the teacher's arm, lots of time and encouragement will be needed. All the children will tense, but those who try to use their free hand to stroke and who can keep kicking can move on to the next skills shortly thereafter.

2. free swimming with flotation device

how to do it

When the child is ready (which may be before he/she realizes) the teacher may let go of the other hand while continuing to back away. The teacher's hands should be held out to the child, just out of reach. Because the child will tense and probably forget to kick, the teacher should give a great deal of encouragement. The suction caused by this backing away will continue to pull the child for a short distance. The first time the child is released, he/she will probably swallow some water and be quite frightened. A great deal of praise for the accomplishment, whether real or not, is needed at this time to try it again. It may take a child several duckings to get the idea. Once this has happened, the distance to swim should be increased until independence is achieved.

The swim bubble will tend to make the child swim in a more vertical position than is desirable. This is all right, however, because any faults can be corrected when the child gets into a horizontal position. Time should be spent in each class on activities without the bubble so that the child does not develop complete dependence upon it.

notes

It must be remembered that the child is not really swimming. He/she should be watched closely when swimming independently, since there will be no defense if the bubble comes off. The purpose of the bubble is to develop the idea and rhythm of swimming and to give the child a sense of accomplishment and independence.

section 6
rhythmic breathing

description

Children develop the ability to breathe in a rhythmic manner. They learn to combine breathing with body positions used in swimming.

activities in this section

		page
1	Bobbing Holding onto Side of Pool	47
2	Bobbing in Shallow Water	47
3	Rhythmic Breathing in a Prone Position	48

1. bobbing holding onto side of pool

how to do it

While holding the side of the pool, or standing on the bottom holding the teacher's hands, the child should duck under the water and blow out a stream of bubbles. When the child surfaces, he/she should inhale. This can be repeated in a rhythmic fashion, submerging for two or three seconds, and inhaling for two or three seconds. The breathing should be done through the mouth. In order to establish a rhythm, the teacher may put a hand on the child's head and push down gently, without forcing, removing the hand when the child comes up. Counting may also prove useful (it is possible to hear under water).

2. bobbing in shallow water

how to do it

While standing in chest-deep water (or on a platform), the child bobs up and down using the arms to help. The number of bobs may be gradually increased until about twenty-five can be done. As the child rises, he/she pushes down with the arms, then pulls up when submerging. If there is difficulty in learning this, the child can hold arms out to the sides in a relaxed manner, and they will rise automatically.

3. rhythmic breathing in a prone position

how to do it

While holding onto the side of the pool in a prone or front-lying position (the teacher can help the child maintain this), the child should turn the head to the side to inhale, and then turn the head face down to exhale by blowing bubbles. The head should be turned to the same side each time, and the breathing should be through the mouth. Kicking may be added when the child has developed a fairly steady breathing rhythm.

notes

Rhythmic breathing is a very difficult skill to establish; many people who swim cannot do it well. Once the skill has been introduced, time in every class should be spent on bobbing and/or rhythmic breathing in a prone position. The proper breathing may not become automatic until long after the child has learned to swim, but the techniques should be started early.

section 7
jumping

description

Children develop the courage and ability to jump into the water

activities in this section

		page
1	Jumping with Assistance from Sitting Position	51
2	Jumping with Assistance from Standing Position	52
3	Jumping from a Standing Position	53

1. jumping with assistance from sitting position

how to do it

The child sits on the edge of the pool with feet resting on the gutter. The teacher holds the child's hands with the arms fully extended. A signal such as "One, two, three, jump!" should always be used. If the child does not jump from self-incentive, the teacher may give a gentle pull. At first, the teacher should catch the child before he/she submerges. As the child becomes more confident, the teacher can permit submerging. If the child swallows some water, there should be little reaction. He/she may be reminded to keep the mouth closed on the next jumps.

notes

It is not necessary for the child to wear a flotation device all the time, but it should be on some of the time so that the child learns what it will do.

A child who really fights the idea of jumping in should wait a while. Playing with the teacher, jumping up and down in the water, ducking under, and splashing may make it easier.

2. jumping with assistance from standing position

how to do it

The child may start from squatting or standing. As in jumping from a sitting position, the teacher holds the child's hands and catches him when he jumps. Again, the child should be given a signal to jump: "One, two, three, jump!" Decreasing the amounts of assistance can be given, so that the child eventually submerges and comes to the surface unassisted. A flotation device should be worn most of the time, although the children need some time without it as well. When the child is fairly confident holding two hands, jumping holding only one hand may be tried.

3. jumping from a standing position

how to do it

The teacher stands three to five feet from the edge of the pool to facilitate moving either forward or backward as the child lands in the water. The child stands with one foot on the edge of the pool and one foot slightly behind (a big issue should not be made of this stance). He/she should also be wearing a flotation device. Both the child and the teacher count "One, two, three, jump!" The teacher extends hands just out of reach as an incentive, and prepares to catch the child as he/she lands.

notes

It may take almost a whole class to teach a child to jump independently. He/she should not be helped at this point. (The child who does not jump from self-initiative may simply not be ready. The teacher may offer a reward, plead, or even use mild threats, but the child must make the decision to jump.)

As the child becomes more confident and able, the teacher can move further and further from the edge of the pool and offer less and less assistance. Eventually, the child will be able to jump and surface independently, although the teacher should always be standing by. When the child is able to jump alone, it can be tried a few times without a flotation device, although the teacher will have to assist in coming to the surface. Again, it is important for the child to understand what the devices do.

section 8
front/prone float

description

Children develop the ability to float in a prone (front-lying) position. They learn to glide through in this position.

activities in this section

		page
1	Jellyfish Float	57
2	Prone Float	58
3	Prone Glide	59

1. jellyfish float

how to do it

The teacher can demonstrate first. The child starts by standing in chest-deep water, then takes a deep breath and lies forward in the water, either grasping the knees or letting the arms just hang where they will. The legs should also be allowed to hang. The child should be completely relaxed. The teacher may give some support under the child's chest in the beginning. In order to stand, the child lifts the head, pulls the knees to the chest, and presses down with the hands. When the hips drop, the child extends feet toward the bottom and stands. The teacher can assist the child in standing by holding onto the hands.

The child should start by trying to float for five seconds. Later, the time can be increased to ten or fifteen seconds.

2. prone float

how to do it

The teacher should demonstrate. The child starts in the same manner as in the jellyfish float, then once in position extends the arms forward and the legs back until he/she is lying flat on the surface. In order to stand, the child just reverses the above procedure. As with the jellyfish float, the teacher may give support under the child's chest, gradually moving the hand away as the child is more able to float on his or her own.

Another way of reaching a prone position is for the child to hold the gutter of the pool while submerging shoulders, putting face in the water and pushing legs up into a prone position with arms fully extended. The teacher may help by assisting the child into the prone position. The child can also practice this with a partner who holds his/her hands just under the water's surface, rather than the child holding the gutter.

The length of time spent doing the prone float should be the same as in the jellyfish float.

notes

These skills should be practiced in quiet water, away from children who are very active. The action of waves may make the child fear losing "balance."

If no provision has been made for a place where the children can stand, one will have to be devised at this point. It is very difficult to teach children to float if they cannot stand. They need the confidence of knowing where the bottom is and where they can stand.

3. prone glide

how to do it

This is very similar to the prone float, except that the child glides by pushing forward with the feet while assuming a prone position. The child may push off from the wall, the bottom of the pool, or from a submerged platform. The child should push toward a wall, a partner, or the shallow end. The distance over which the child glides should be gradually increased until he/she can go about six feet. The techniques for standing after gliding are the same as those used in floating.

section 9
back float

description

Children develop the ability to float in a back-lying position. They learn to glide through the water in this position.

activities in this section

		page
1	Back Float	63
2	Back Glide	64

1. back float

how to do it

Starting in shallow water after a demonstration by the teacher, the child should squat down until shoulders are submerged, tip head back so that he/she is looking straight up, stretch arms to the side under water with palms up, and arch the back so that hips are pushed up to the surface. The feet will rise by themselves. (With many children, the feet will not come up very far, and as a result they will float almost vertically.) The teacher can give decreasing amounts of support to the back of the head and the small of the back. The child should be told to hold the breath while floating, later to breathe slowly.

In order to stand, the head should be lifted so that the child can look down at the chest while arms scoop forward and knees bend up to the chest. When the hips drop, the feet are extended to the bottom.

notes

It is very important that the child's hips be near the surface. If the child is having difficulty, he/she should be told to arch the back. Arms may be extended over the head in the water rather than to the side.

Many children find the sensation of water in their ears unpleasant. This is expecially true when they are on their backs. To become accustomed to this sensation, they can submerge their ears in the water for increasing lengths of time.

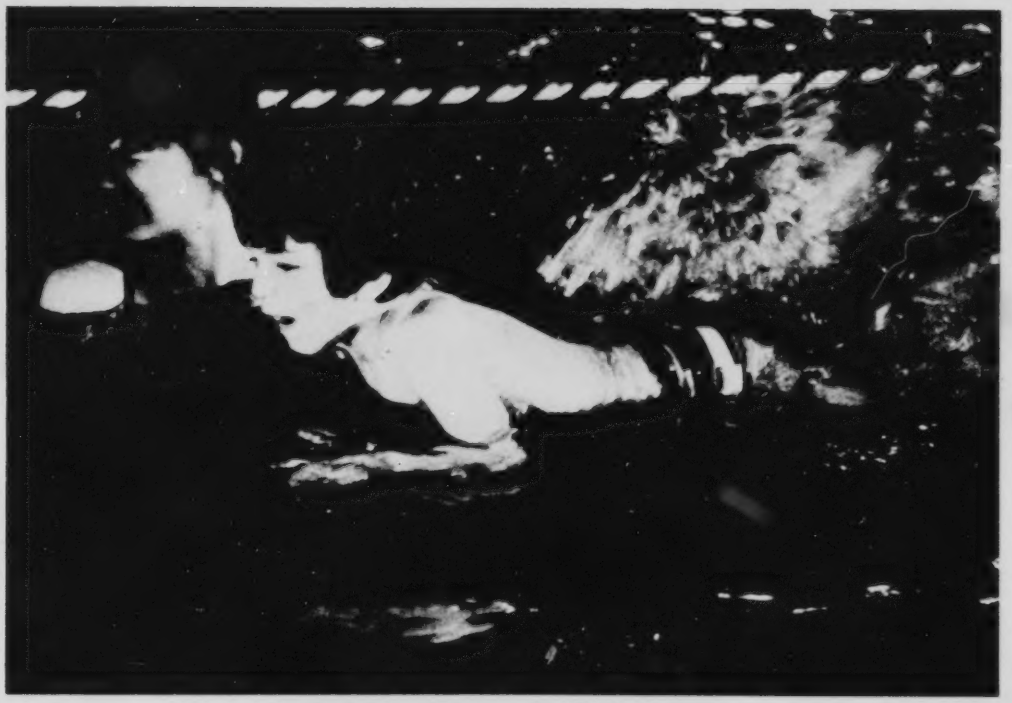
2. back glide

how to do it

This is similar to the back float except that the child pushes off the bottom with the feet when in position to float. During the glide, the arms will be closer to the sides than in floating. If the head is tilted too far back, water will wash over the face; the child should look straight up. Use the same procedure for standing as in floating.

The child may also push off from the side of the pool, although it will be more difficult to get into a good position, and water will be more likely to go into the face.

The child should never glide toward deep water. If it is not possible to stand, then the child should glide toward the teacher or a buddy.



section 10
glide with kick

description

Children develop the ability to kick while gliding on both the front and the back.

activities in this section

		page
1	Prone Glide with Kicking	67
2	Back Glide with Kicking	68

1. prone glide with kicking

how to do it

The teacher should encourage the child who is able to do a prone glide and has developed a fairly regular kick to combine the two. The child should start out by gliding toward the side of the pool or to the teacher and add the kick once he/she gets going. The distance can be gradually increased up to the limits of the child's ability to hold his/her breath. Continuing after taking a breath is difficult, and should not be tried. A challenge may help increase distance.

2. back glide with kicking

how to do it

Because it is difficult to maintain a good body position on the back when kicking, the teacher may have to have the child practice the kick while supported in the proper position.

The child should start with a back glide, get going, then start the kick, gliding toward the teacher or a partner rather than the side of the pool (to avoid bumping the head). Tipping the head too far back, or "sitting" in the water, should be avoided.

section 11
human stroke

description

Children develop the ability to coordinate both armstroke and kicking, while lying on the front in the water. This is developed into a complete swimming stroke -- the Human Stroke (also called the "dog-paddle"). Integration of breathing lets the child swim one complete stroke in the correct position.

activities in this section

		page
1	Human Stroke, Arms Alone	71
2	Human Stroke, Armstroke & Kicking	72
3	Human Stroke, Armstroke & Breathing	73
4	Complete Human Stroke with Breathing	74

1. human stroke, arms alone

how to do it

After a demonstration, the child should start a prone glide without kicking, start moving, then add the previously learned arm stroke. The face should be kept in the water, with movements unhurried and regular. The goal is to swim eight to ten feet toward the wall or to the teacher, never to the deep end.

2. human stroke, armstroke & kicking

how to do it

The child should start with a prone glide, add the kicking, and then add the arm stroke, keeping the face in the water. Each child should be able to swim in this fashion for at least ten feet before progressing to the next step.

3. human stroke, armstroke & breathing

how to do it

Standing at first in shallow water, the child should combine the arm stroke with the breathing. After the arm stroke has been started, the child then turns the face to one side to take a breath through the mouth as the arm on that side is finishing the pull and the other one is beginning. The child then rotates the face down to breathe out. Breathing should happen on the same side each time (usually the left for most children). A child who has mastered the rhythm should practice the arm movements and breathing while walking in the water.

4. complete human stroke with breathing

how to do it

The child starts with a prone glide kick, adds the arms and then adds the breathing. Many children will lift their heads up and to the side in order to breathe, instead of turning to the side; this will cause their feet to sink and make it difficult for them to swim. They should be told to keep the ear on the non-breathing side in the water when they breathe. All the movements should be kept slow and even. The child breathes through the mouth.

notes

This is the ultimate! Most of the children may not reach this point even after a year of one class per week. Those who do are real swimmers.

These last skills will not come quickly; each will need a good deal of practice.

section 12
back stroke

description

Children develop the ability to swim one complete stroke while in a back-lying position.

activities in this section

		page
1	Armstroke on Back -- Finning	77
2	Complete Backstroke	78

1. armstroke on back ... ... finning

how to do it

In order to learn the motion for finning, the child first practices out of the water. Hands should be at the sides, with thumbs touching the legs. Hands are drawn up with the elbows pointing toward the bottom of the pool until they reach hip level. They then turn so that the palms are toward the feet, and then, without stopping, push back into place. This movement is a continuous one, but not hurried.

The child who understands this movement can try it with a back glide in shallow water.

2. complete backstroke

how to do it

The child who is able to fin with the back glide should add kicking with hips up and feet just coming out of the water. A teacher or partner can be present to keep the child from bumping into the wall. The child breathes in a hurried normal fashion and keeps the movements unhurried and even.

notes

This is not a "speed" stroke. It can be a "resting" stroke.

section 13
turning over

description

Children develop the ability to turn from front to back and from back to front in deep water. This is a safety skill, as it enables the child to change strokes when he/she becomes tired in swimming long distances.

activities in this section

		page
1	Turning from Front to Back	81
2	Turning from Back to Front	82

1. turning from front to back

how to do it

The child who can swim fairly well on both front and back should learn to turn over in order to change strokes. This permits resting without having to touch bottom.

While swimming in a prone position, the child should lower one shoulder and turn the head to the opposite side as if in preparation for a breath. This position should be held until the child rolls over and starts swimming the back-stroke. This skill is easier if the child who normally breathes on the left drops the right shoulder and turns the head to the left (the breathing side). The child should be reminded to push the hips to the surface of the water to ease in rolling over.

2. turning from back to front

how to do it

This is used primarily for getting out of the resting position on the back and returning to the "speed" stroke on the front.

While swimming on the back, the child should drop one shoulder and turn the head to that side. This position can be held until the child rolls over and can start swimming the human stroke.

notes

The feet will have a tendency to drop when making the turns. To counteract this, the kick should be resumed as soon as the child reaches the desired position, even if the arms are not ready to start.

section 14
changing direction

description

Children develop the ability to change direction in deep water. This is another safety skill, enabling the child to head back to shore and to avoid obstacles while swimming.

activities in this section

		page
1	Changing Direction on the Front	85
2	Changing Direction on the Back	86

1. changing direction on the front

how to do it

The child swimming the human stroke should reach one arm in the desired direction and turn the head in that direction. Stroking should continue in that direction until the child has turned as far as desired.

2. changing direction on the back

how to do it

The child swimming the backstroke should tilt the head in the desired direction. Stroking should be done harder with the hand on the opposite side while almost stopping the action of the other hand. This will have the effect of pushing the child in the desired direction.

notes

When turning on the front, the child should not lift the head very far out of the water. The child will have to be reminded in both types of turn that he should keep kicking.

section 15
feet ... first jump

description

Children develop the ability to enter the water from a height above the surface, using the foot-first jump

activities in this section

		page
1	Jumping into Chest-Deep Water	89
2	Jumping into Over-the-Head Water (6-8 feet deep)	90

1. jumping into chest-deep water

how to do it

This is just like jumping into the water while wearing a flotation device, except that the child will not automatically "pop" to the surface. The child stands with toes curled over the edge. The child should keep his mouth closed and exhale through his nose during the jump. As feet touch the bottom, the child bends the knees and pushes off the bottom in an angle forward. Kicking and armstroking start when the child surfaces.

2. jumping into over-the-head water (6-8 feet deep)

how to do it

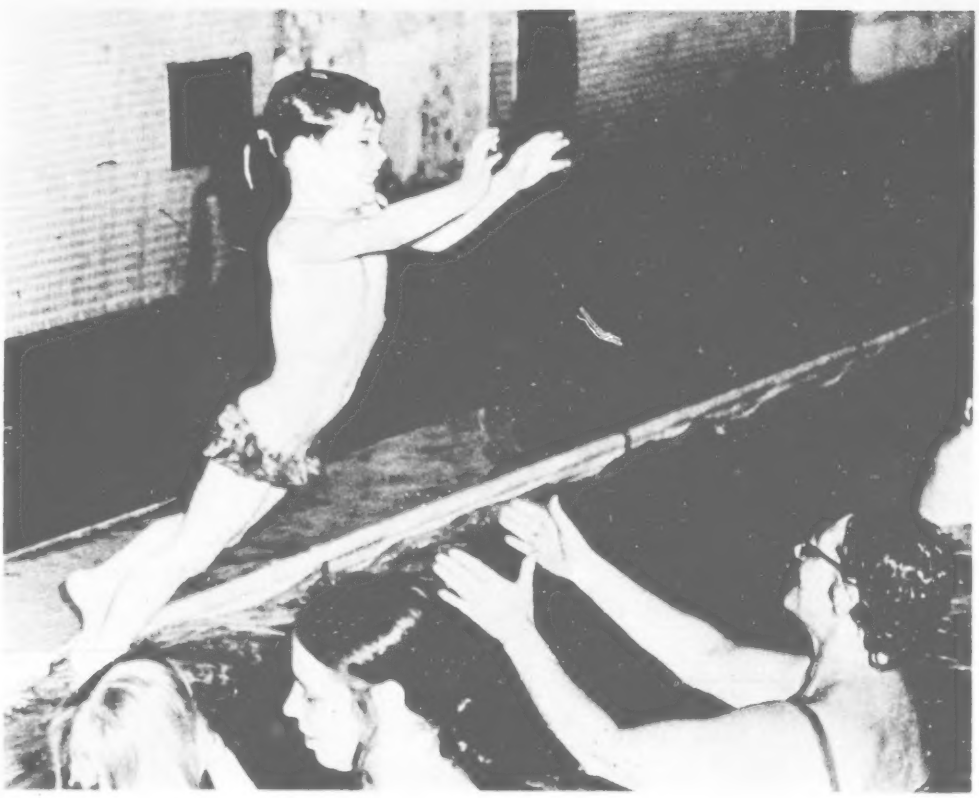
This is really the same as jumping into shallower water, except that the child will be under water for a longer time.

The child who does not touch bottom should start kicking the feet when the downward momentum slows. Reaching hands toward the surface and pulling them to the side help the child surface.

notes

During these lessons, the teacher should have a rescue pole 8-10 feet long.

If a child appears to be in trouble after jumping, the teacher reaches out the pole to the child so that he/she may grab it. The teacher stands with feet spread and weight back, to prevent being thrown off balance when the child grabs the pole. The teacher should touch a child who does not see the pole with it. The child holding the pole is towed to the side and assisted out. Unless there is a prolonged coughing spell, the child should try jumping again into the shallower water.



section 16
standing front dive

description

Children develop the ability to enter the water using a head-first dive.

activities in this section

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1	Diving from a Sitting Position	93
2	Diving from a Kneeling Position	94
3	Standing Front Dive	95

1. diving from a sitting position

how to do it

The child sits on the edge of the pool with feet resting on the gutter. The arms are extended over the head so that they touch the ears, and the thumbs hooked together, knees apart, and the chin resting on the chest. Reaching fingertips toward the water, the child then leans forward and pushes the hips up just at the moment of falling.

Many children jump into the water in a curled position, instead of letting their feet follow them. To help the child jump correctly, the teacher may hold the feet on the gutter, letting them go as the water is entered.

In order to surface, the child lifts the head, turns the hands up, and starts kicking. To rise, the hands should be pulled down to the sides.

notes

Diving from this position should take place in 5 or 6 feet of water. The teacher should have a rescue pole, and there should also be someone else in the water near where the child will land.

2. diving from a kneeling position

how to do it

The child kneels on one knee with the other foot at the edge, toes hooked over the edge. Arms should be extended overhead as before. The child then leans forward, reaching the fingers to the water, and chin on the chest. The child should give a push with the foot as the water is entered.

The teacher may assist by pushing on the head and hips, or by holding the foot down, but should not force the child.

The child surfaces in the same manner as from the sitting dive.

notes

As before, there should be six feet of water, and the teacher should have a rescue pole. There should be a second person in the water.

3. standing front dive

how to do it

This is a big step and frightens many children. The water looks far away and deep. They should not be forced to dive. A second adult in the water in addition to the teacher on the deck may add reassurance.

The child stands, feet together, toes hooked over the edge, arms overhead, and chin on chest. He/she leans forward from the waist, keeping the legs straight. During the fall, the child gives a hard push with the feet. Surfacing is as before.

Many children will have a tendency to dive flat or "bellyflop" at this point. This is usually caused by lifting the head too soon. The child should be reminded to keep chin on chest until in the water. There should be 6 to 5 feet of water.

notes

If the child has an unpleasant experience with a dive, back up to the previous step.

section 17
personal safety

description

Children develop the ability to behave in a safe manner in and around the water.

activities in this section

		page
1	Behavior around Swimming Area	99
2	Use of the Lifejacket	100

1. behavior around swimming area

how to do it

The following commands should be emphasized throughout the program: No running on decks. No pushing or roughhousing. Stay out of the water until permission is given. Stay with the group.

In addition, the children should be taught not to throw objects into the water (exceptions are objects used for rescue skills and ball play). The children should not splash others unless others expect it and want to be splashed.

2. use of the lifejacket

how to do it

A lifejacket does not automatically protect the wearer. It requires practice to remain in a stable, upright position (see instructions below for how to use). The lifejackets used should be those certified by the Coast Guard, of the Mae West type, and the proper size capacity to support the child (there is a label on the jacket with this information). A child who can use a lifejacket will be able to go on boats and will be safer around swimming areas.

The child may be put in the water with the jacket on, the teacher stabilizing him/her at first by holding the jacket by the collar. The child should spend enough time in the jacket to become accustomed to the feel of it. This may take some time with those who are very frightened. After the child gains some confidence wearing the jacket, he/she can try moving arms and legs in order to go somewhere, and may also try jumping in the water with the jacket on. The child should be told to fold the arms across the chest when jumping to keep the jacket from being forced up into the face.

notes

The more swimming skills a child learns, the safer he/she will be around the water, and the more aware of possible hazards and of personal limitations.

section 18
assisting another

description

Children develop the ability to give assistance to someone who is having difficulty. The latter skills involving one's body directly are suitable only for the older, stronger, and more able children. The children should be taught that if they are not able to help someone in trouble, they should ask the nearest adult.

activities in this section

1	Assisting Another to Stand	103
2	Assisting Another by Throwing a Floating Object	103
3	Assisting Another by Reaching	104

1. assisting another to stand

how to do it

The child may help another who is having difficulty regaining an upright position from a prone or back floating position by supporting the victim under the shoulders, chest, or back until the victim can stand. The rescuer should stand in a stable posture with the feet spread when helping another.

2. assisting another by throwing a floating object

how to do it

The child should throw the object so that it lands near the victim. Ideally, it should land just in front of the other person. If the object has a rope attached, such as a ring buoy, the rescuer should hold onto the end in order to pull the victim to safety. Floating objects include rings, life jackets, flutter boards, picnic jugs, or bleach bottles. The child should practice with a wide variety of these objects in order to become acquainted with them.

3. assisting another by reaching

how to do it

A rescue pole (a broom handle, or a tree branch) can be used to reach someone in the water. The child should stand with the feet spread and weight back when extending the pole. The victim can then be pulled to safety.

If no poles are available, the child may lie down and extend a towel, shirt, or pair of pants to the victim. He will have to throw one end of the towel, keeping hold of the other end.

notes

Only the older, bigger, and more able children will be able to learn these rescue skills. It will take a lot of practice, and the teacher should not make a "big thing" out of what the children are doing.

3 APPENDICES

appendices in this part

107 A: SWIMMING RELEASE

108 B: SWIMMING INFORMATION SHEET

109 C: SWIMMING PROGRESS CHART

113 D: TEACHING SUGGESTIONS FOR VOLUNTEERS IN SWIM PROGRAM

114 E: BATH-TIME ACTIVITIES FOR CHILDREN

116 F: SWIM PLATFORM

117 G: BIBLIOGRAPHY

119 H: INDEX OF ACTIVITIES

107 A

Swimming Release

I understand that the Department of Mental Health, Region ___, has arranged a swimming program for children in the _____School in _____. The program will be held at the _____, every _____, except during school holidays, from _____ to _____. I understand that a certified swimming instructor will be present during this time, and that each child participating in this program will be accompanied by an adult, either a staff member or a volunteer. I also understand that the program may be rescheduled.

I _____ hereby grant permission for _____ who attends _____ at the _____ to participate in this proposed swimming program at the _____.

Signature: _____

Relationship to Child: _____

Witness: _____

Date: _____

B

Swimming Information Sheet

NAME _____ AGE _____

NICKNAME _____

PHONE _____ EMERGENCY PHONE _____

Has your child ever been in the water? _____

Where? Pool _____ Beach _____

Does your child have any fear of water? _____

Does your child swim, and to what extent? _____

In deep water? _____

Has your child ever been in a swimming class? _____

Where? _____

Does your child respond to orders? _____

Does your child have a hearing problem? _____

Is your child able to speak? _____

Does your child have any problem which may limit or restrict swimming? (If yes, please explain:)

_____

Has your physician recommended any special exercises for your child? (If yes, please explain:)

_____

Please describe, briefly, your child's behavior:

_____

_____

_____ _____

Signature of Parent or Guardian Address

_____ _____

Date Phone

C

Swimming Progress Chart

NAME: _____ AGE: _____

SCHOOL/ADDRESS: _____

SPECIAL INSTRUCTIONS OR LIMITATIONS: _____

_____

CLASSROOM CARRY-OVER ACTIVITIES: _____

_____

INSTRUCTOR: _____ DATE: _____

SKILLS	PASSED *	COMMENTS
1. Takes off clothes		
2. Puts on suit		
3. Goes into pool area		
4. Approaches pool		
5. Sits on edge with feet in water		
6. Kicks feet in water while sitting on edge		
7. Enters water with assistance		
8. Enters water using ladder		
9. ½ Jump from sitting assisted, not completely submerging		
10. Holds onto edge of pool alone		
11. Stands in water alone (where applicable)		
12. Walks in water while holding edge		
13. ½ Jump from standing, assisted, not completely submerging		
14. Walks in water without holding on		
15. Breath control skills**		
a. Tolerates having face wet with instructor's hand		
b. Wets face with own hand		
c. Tolerates having face wet with sponge by instructor		
d. Wets own face with sponge		
e. Allows water to be dribbled over head from sponge by instructor		

SKILLS	PASSED *	COMMENTS
f. Dribbles water over own head with sponge		
g. Washes own face with water using 2 hands		
h. Puts chin in water		
i. Closes mouth before submerging chin		
j. Puts mouth in water		
k. Blows bubbles		
l. Puts nose in water		
m. Puts whole face, not ears, in water		
n. Allows self to be momentarily totally submerged		
o. ½ Jump from sitting, assisted, totally submerged		
p. ½ Jump from standing, assisted, totally submerged		
q. Momentarily submerges self in vertical position		
r. Momentarily submerges self face down while holding on		
s. Takes a breath and holds it while submerging		
t. Jumps from sitting while holding instructor's hands, totally submerged		
u. Jumps from standing while holding instructor's hands, totally submerged		
v. Bobs a few times after demonstration (Rhythmic Breathing)		
16. Allows body to be put in prone position, supported under hips and holding on		
17. Gets into prone position by self while holding on		
18. Maintains kicking in prone position after starting with assistance		
19. Kicks feet in prone position while holding on		
20. Allows self to be put into supine position (back-lying) supported under hips		
21. Gets into supine position supported under hips by self		
22. Maintains kicking while in supported supine position after starting with assistance		
23. Kicks feet in a supported supine position		

SKILLS	PASSED*	COMMENTS
24. Maintains kick in prone tow after starting assistance		
25. Kicks feet in prone tow		
26. Maintains kick in supine tow after starting with assistance		
27. Kicks feet in supine tow		
28. Maintains arm stroke in supported prone position after starting with assistance		
29. Uses arm stroke in supported prone position		
30. Maintains arm stroke in supported supine position after starting with assistance		
31. Prone tow, kicking, using flutter board with hands held in place		
32. Prone tow, kicking, using flutter board supported by instructor		
33. Kicks in prone position using flutter board		
34. Combined arm and leg stroke in supported prone position		
35. Combined arm and leg stroke in supported supine position		
36. Combined arm and leg stroke using floatation device (bubble or belt)		
37. Jumps from sitting position to person standing in water		
38. Jumps from standing position to person standing in water		
39. Jellyfish float		
40. Prone glide		
41. Prone glide and recovery		
42. Back glide		
43. Back glide and recovery		
44. Jumps into shallow water		
45. Prone float		
46. Prone float and recovery		
47. Back float		
48. Back float and recovery		
49. Combined stroke on back		
50. Combined stroke on front, no breathing		

SKILLS	PASSED*	COMMENTS
51. Jumps into deep water		
52. Combined stroke on front with breathing		
53. Swims under water		
54. Turns from front to back		
55. Turns from back to front		
56. Safety skills		
a. Personal safety skills		
b. Simple reaching and throwing assists		

* There are three levels of passing. The first involves performing the skill with assistance from the teacher. The second involves performing the skill with only verbal direction from the teacher. The third involves performing the skill on self initiation when appropriate.

** Breath control skills should be taught along with other skills. This is the order in which they occur, starting with their introduction.

Teaching Suggestions for Volunteers in Swim Program*

1. Follow progression on chart.
2. Use a calm, well-controlled voice when speaking to the learner. Facial expressions and tone of voice will do much to instill a feeling of confidence and enjoyment.
3. Be gentle but firm when helping the learner overcome fear. Try to interest the individual in something other than fear, such as a toy.
4. Keep the fun in fundamentals. Use play and games in teaching.
5. Don't expect immediate results in the learning of skills. Patience -- patience, more patience, and still more patience -- is the key to a successful, happy learning experience.
6. Be realistic in your goals for the child.
7. Imitation is a valuable way of learning; use demonstration as well as direction in teaching.
8. Give the learner plenty of opportunity to experience success in every class.
9. Be quick to praise, even for small successes.
10. NEVER take your eye off the person for whom you are responsible!
11. REMEMBER: the retarded person is a human being who has the same needs and wants as you have. What you want and need from others is what the retarded person wants and needs from you. It's up to you to help achieve these goals.

---

*Adapted from: Swimming for the Mentally Retarded, Richard L. Brown, National Association for Retarded Children.

Bath-time Activities for Children

The following are some activities which are designed to promote the confidence and skills needed to learn to swim:

1. Allow play with floating toys, plastic bottles, sponges, cups and a doll. The child may teach "dolly" how to blow bubbles, kick, or put her face in the water. The child can show "dolly" how to do these things by demonstrating. Pouring water over "dolly's" head and then his/her own with a sponge or cup can help the child become used to the sensation of water on his/her face and in the ears.

2. The child can practice his/her kicking in the tub, on both the front and the back. When on his/her back, the child should try lying with the ears under the water, as the sensation of water in the ears takes some getting used to.

3. The child can practice blowing bubbles in the tub. He/she can start by blowing into a pan or bowl, either in the tub or at any other time. Secondly, the child can try lying on the stomach and putting the face in the water to blow bubbles. Plastic drinking straws are a useful device for helping children to blow properly and for children who are afraid to put their faces in the water. They can be cut shorter and shorter so that the child's face gets closer to the water until it finally goes in.

4. Showers provide an opportunity to experience water on the face and in the ears. The water should not be turned on too hard at first. The child may take many of the same toys into the shower that he/she takes into the tub. If the child is fearful of going under the stream, having an adult or "dolly" go too can be a great help.

5. All of the above activities can be done in a shallow, inexpensive molded wading pool. The pool should be placed in the sun to allow the water to warm.

Bath-time Activities for Children
Continued

NOTE: Bath-time should be a pleasant time. Allow plenty of time for play, and make sure that the water is a comfortable temperature. Children are more sensitive than adults to extremes in temperature. Pulling the shower curtain part way and putting towels on the floor will take care of most of the water that is splashed out of the tub.

CAUTION: Never leave a young child unattended in the tub or pool: it is possible to drown in a few inches of water. Older children should be checked frequently.

F

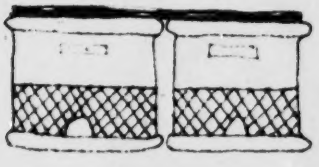
Swim Platform

PURPOSE: To provide an area in the swimming pool where small children can stand.

MATERIALS:
- 12 plastic milk cases (obtained at supermarkets from friendly managers)
- heavy-duty rubber matting, 6 ft. x 26"
- wire of copper or other non-corrosive metal (try scrounging at the dump), about 10 ft.
- Two 7' lengths of galvanized 1" pipe, filled with cement and sealed. If pipe is not available, bricks may be wired to the bottoms of each case.

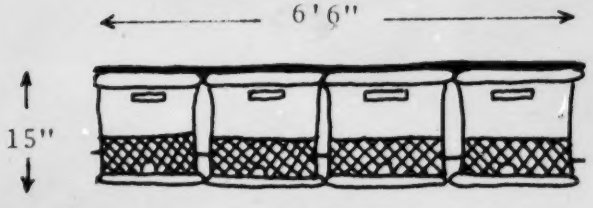
CONSTRUCTION:

The milk cases are wired together in two rows of six each: the two rows should then be wired together.
The pipes should be run through the length of the platform and wired in place. The ends should be covered with waterproof material. They will extend about 5" at each end. This platform is turned so that the closed side of the cases is up and the rubber matting may be fitted on top.



- rubber mat
- brick - alternative to pipe for weight
- 1" pipe

END VIEW



- rubber mat
- brick
- 1" pipe

SIDE VIEW

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Additional Resource

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H

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